

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

(38)

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

	ient Name			Telephone Number	Date of In		ID#		
Do/1	or G	(en	eral	() Establishment	(mm/dd/y				
Establishn	ient Addre	ss (nu	mber and street, city, state, zip code)	502-430-7600 () Owner	2-19	5/19	18-75		
970	Heli	Yez q	e Way, bremille, IN 47/24			<i>''''</i>	-		
Owner			,	Purpose:	Follow-up Release Date				
Vol	gen (06	p LLC	1. Routine	100 10 Jays				
Owner's X	ddress M T.	~ <i>,</i>	DALLA A & W W M. 78/27673	2. Follow-up	Summary of Violations:				
Person in C	horas.	<u>v</u> \	Ridge, Goodettsville TN37072	3. Complaint					
F CISUII III A	Jarge.	roh	West	4. Pre-Operational	C NC R				
Responsibl		- (5. Temporary	Menu Type (See back of page)				
r		-	•	6. HACCP	Ment Type (nee back of page)				
Certified F	ood Handl	er		7. Other (list)	$1 \times 2 3 4 5$				
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• CRITICAI	L TTEMS AL	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	<u></u>				
1	• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"								
Section#	C/NC	R	Narrative	MMAKI OF YOUATIONS AD	M III I LE W				
295	NIC	Q		11/2 4		To Be Cor	rected By		
0~ r J	110		Observed crusted dried v bottom shelf of the mil	n//K on/w	٤	5 da	يح کيز		
		\vdash	bottom their O+ The Mil	1 Cooler					
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Received by (name and title printed): Inspected by (name and title printed): There Lieber EIB									
Received by	(signature)	: 1 ^	A	Inspected by (signature):					
Sarah Wash									
cc:	- V		cc:		ee:				

Floyd County Health Department Inspection Notes								
Code # V. C/NC Control Comments Comment								
		PIC: Sarah West CFH: M/K Health Policy (Y - N Food Code (Y - N)						
		CFH: N/						
		Health Policy (Y-N Food Code (D-N)						
295	11/	Di Alla						
797	110	Dried Milk or Consler						
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